

# Electronic Filing System (EFS) Data

## Electronic Patent Application Submission

### USPTO Use Only

EFS ID: 11129  
Application ID: 09681370  
Title of Invention: PROCESS FOR AUDITING  
INSURANCE UNDERWRITING  
First Named Inventor: Andrew Kramer  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2001-03-26   
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: 00,145  
Digital Certificate Holder: cn=Kent Erickson, ou=Registered Attorneys, ou=Patent and  
Trademark Office, ou=Department of Commerce, o=U.S.  
Government, c=US  
Certificate Message Digest: 6faXUkk8p1mTv8xM+D4eQQ==  
Total Fees Authorized: \$950.0

Payment Category: CC – Credit Card  
Credit Card Number: \*\*\*\*4233  
Expiration Date: 02012002  
Card Holder Name: Shughart Thomson& Kilroy  
RAM User ID: EFSPROD  
RAM Accounting Date: 2001-03-27  
RAM Sequence Number: 269815  
RAM Payment Status: RAM success  
Postal Code: 64105



# TRANSMITTAL FORM

Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 00,145

## PROCESS FOR AUDITING INSURANCE UNDERWRITING

First Named Inventor: Andrew Kramer

**SUBMITTED BY**

Name: Kent R. Erickson Esq.  
Registration Number: 36793  
Electronic Signature Mark: Kent R. Erickson Date Signed: 20010323

*I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.*

*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

**Attached Files:**

specification	KRAMER01.xml
bibd-transmittal	kramer1apds.xml
declaration	Krap0001.tif
declaration	Krap0001.tif
fee-transmittal	kramer1fee.xml

Krap0001.tif

Krad0001.tif

**Comments:**

DECLARATION AND POWER OF ATTORNEY  
FOR A PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled PROCESS FOR AUDITING INSURANCE UNDERWRITING, as described and claimed in the specification which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to in the oath or declaration.

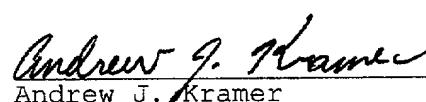
I acknowledge the duty to disclose to the Patent and Trademark Office all information which is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, Sec. 1.56.

I hereby appoint Kent R. Erickson, Reg. No. 36,793; Malcolm A. Litman, Reg. No. 19,579; Gerald M. Kraai, Reg. No. 34,854; Mark E. Brown, Reg. No. 30,361; Mark L. Kleypas, Reg. No. 43,720; Marcia J. Rodgers, Reg. No. 33,765 all members of the bar of the State of Missouri, whose postal address is Shughart Thomson &

Kilroy, P.C., Twelve Wyandotte Plaza, 120 West 12th Street,  
Kansas City, Missouri 64105, telephone (816) 421-3355; and  
Cecilia Lofters, Reg. No. 33,434, whose postal address is GE  
Capital Corporation, 260 Long Ridge Road, Stamford, Connecticut  
06927, telephone (203) 357-4547, as my attorneys, with full power  
of substitution, to prosecute this application, to make  
alterations and amendments therein, to receive the patent, and to  
transact all business in the Patent Office connected therewith in  
my behalf.

I hereby declare that all statements made herein of my own  
knowledge are true and that all statements made on information  
and belief are believed to be true; and further, that these  
statements were made with the knowledge that willful false  
statements and the like so made are punishable by fine or  
imprisonment, or both, under Section 1001 of Title 18 of the  
United States Code and that such willful false statements may  
jeopardize the validity of the application or any patent issued  
thereon.

Date: 22 March, 2001

  
Andrew J. Kramer

Residence: 14317 Howe Drive, Leawood, Kansas 66224

Post Office  
Address: 14317 Howe Drive, Leawood, Kansas 66224

Citizenship: United States of America

# FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 950**

## BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 4233  
Expiration Date: 20020201  
Authorized Name: Shughart Thomson& Kilroy  
Billing Address: 64105

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 710

Subtotal For Basic Filing Fee: \$ 710

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 12	103	\$ 18	0	\$ 0
Independent Claims: 6	102	\$ 80	3	\$ 240

Subtotal For Extra Claims Fees: \$ 240